SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)									
X	11a		11b		11c		12		
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NAME OF COMMITTEE (In Full) American Health Care Associ	ation Political Action Committee				
Full Name (Last, First, Middle Initial) Jon Reardon	Date of Receipt				
Mailing Address 1202 Weiss Street	02				
City Saginaw	State Zip Code MI 48602-5471	Transaction ID : C1921600 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	275.00			
Name of Employer Hoyt Nursing & Rehab Centre	Occupation Owner				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00				
Full Name (Last, First, Middle Initial) Stephen Reissman		Date of Receipt			
Mailing Address 5120 W Goldleaf Circle Suite 400 City	State Zip Code	02 06 2013 Transaction ID : C2291693			
Los Angeles FEC ID number of contributing federal political committee.	CA 90056-1297	Amount of Each Receipt this Period 1250.00			
Name of Employer Country Villa Health Services Receipt For:	Occupation President/CEO Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	1250.00				
Full Name (Last, First, Middle Initial) Leonard Russ		Date of Receipt			
Mailing Address 40 Keogh Lane		02 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City New Rochelle	State Zip Code NY 10805	Transaction ID : C1921034 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1250.00			
Name of Employer Bayberry Health Care Receipt For: Primary General Other (specify)	Occupation Skilled Nursing Facility Owner & Admin Aggregate Year-to-Date ▼ 1250.00				
SUBTOTAL of Receipts This Page (optional).		2775.00			
TOTAL This Period (last page this line numb	er only)				